

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	W.A		07/13/01
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	TA	TC 1113	8-23-01
<b>RESPONSE FORMALITY REVIEW</b>	TA	1113	10-25-01

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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569  
8/22/01  
JC-571  
10/26/01